Lumpkin CountyParks and Recreation Department

Athletic Refund Request Form



| Make Check Payable To: | |
|--|---------------|
| Address: | |
| Home Phone: | _ Cell Phone: |
| Refund Amount Due: | _ Reason: |
| | |
| Program: | |
| Participant's Name: | |
| A \$15.00 administrative fee will be deducted from original amount paid for all refunds. After uniforms are ordered, the cost of the uniform will also be deducted from the refund. No refunds will be given once the season/session has begun unless it is medically related. Lumpkin County reserves the right to process full refunds based on individual circumstances when families have to relocate outside of Lumpkin County. | |
| Signature: | Date: |
| - Office Use Only - | |
| Charge to Account Number: 100 – 004 – 61200 – 00034 – 3 | 47201 |
| | |
| Staff Signature: | Date: |